PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

Effective October 1, 2003									0201	42	5	
	· · · · · · · · · · · · · · · · · · ·	CLAIMS A	S FILED - PART I (Column 1) (Column 1)			umn 2) .	SMALL ENTITY TYPE			OR	•	R THAN ENTITY
TOTAL CLAIMS			25					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUME	NUMBER EXTRA		SIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			25 minus 20= .*		*	5		\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			2 minus 3 = *		• 1		>	(43=	1	OR	X86=	86
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT				-	145=		OR	+290=	00
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2				L	OTAL	<u> </u>	OR	TOTAL	946
CLAIMS AS AMENDED - PART II									J •···	OTHER		
_	,	(Column 1)	(Column 2) (Column 3				S	IALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u>	×	43=		OR	X86=	
<u></u>	FIRST PRESE	ENTATION OF ME	ULTIPLE DE	PENDENT	CLAIM		+1	45=		OR	+290=	
		·								OR	TOTAL	
	(Column 1) (Column 2) (Column 3)								<u> </u>] • · · /	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST BER USLY	PRESENT EXTRA	·R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X	9=		OR	X\$18=	
AME	Independent	* ·	Minus ***		C1 4114	= .	X	13=	·	OR	X86=	
	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	+290=	
								OTAL , FEE		OR ,	TOTAL ADDIT. FEE	
	•	(Column 3)			•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER . USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	DEDENDENT OF		=	X4	3=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	15=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE	
	The "Highest Num	mber Previously Paid mber Previously Paid	For (Total or	o SMACE IS Independer	ress than nt) is the	highest number			ropriate box			